



PTO/SB/01 (10-01)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	TRAV0011
First Named Inventor	Vincent ARMENTANO, et al.
COMPLETE IF KNOWN	
Application Number	10/648,808
Filing Date	August 27, 2003
Group Art Unit	2121
Examiner Name	To Be Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND SYSTEM FOR KNOWLEDGE MANAGEMENT AND EFFECTIVE MENTORING OF INSURANCE CLAIM PROFESSIONALS

the specification of which (Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY) 8/27/03 as United States Application Number or PCT International

Application Number 10/648,808 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	27510	OR	<input type="checkbox"/> Correspondence address below
Name					
Address					
City		State		ZIP	
Country		Telephone		Fax	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Vincent		Family Name ARMENTANO or Surname	
Inventor's Signature		Date 3/22/07			
GLASTONBURY Residence: City		CT State	US Country	US Citizenship	
68 Fairway Crossing					
Mailing Address					
Glastonbury City		CT State	06033 Zip	US Country	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name CRONIN or Surname			
Inventor's Signature		Date			
Lakeville Residence: City		MA State	US Country	US Citizenship	
12 Old Powderhouse Road					
Mailing Address					
Lakeville City		MA State	01906 Zip	US Country	
<input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet		Page 1 of 1	
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle if any)		Family Name or Surname			
Annette		TEPPER			
Inventor's Signature		Date			
Residence: City	Avon	State	CT	Country	U.S.
Mailing Address	16 Stimpbach				
Mailing Address	City	State	CT	ZIP	06001
	Avon			Country	U.S.
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle if any)		Family Name or Surname			
Robert J.		MCNICHOLS			
Inventor's Signature					Date 3-22-04
Residence: City	Saugus	State	MA	Country	US
Mailing Address	5 Hillcrest Street				
Mailing Address	City	State	MA	Zip	01906
	Saugus			Country	US
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle if any)		Family Name or Surname			
Julia		MORGAN			
Inventor's Signature					Date
Residence: City	Morgan	State	CA	Country	US
Mailing Address	1206 River Drive				
Mailing Address	City	State	CA	Zip	94556
	Morgan			Country	US

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			<input type="checkbox"/>	YES NO
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

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Address					
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NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Vincent		Family Name ARMENTANO or Surname	
Inventor's Signature				Date	
GLASTONBURY		CT	US	US	
Residence: City		State	Country	Citizenship	
68 Fairway Crossing					
Mailing Address					
Glastonbury City		CT State	06033 Zip	US Country	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Susan		Family Name CRONIN or Surname	
Inventor's Signature				Date	
Lakeville		MA	US	US	
Residence: City		State	Country	Citizenship	
12 Old Powderhouse Road					
Mailing Address					
Lakeville City		MA State	01906 Zip 02346-2001	US Country	
<input checked="" type="checkbox"/> Additional Inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

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Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Annmarie		TEPPER		
Inventor's Signature			Date	
Residence: City	Avon	State	CT	Country
				U.S.
Citizenship		U.S.		
Mailing Address 16 Steeplechase				
Mailing Address				
City	Avon	State	CT	ZIP 06001
				Country U.S.
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Robert J.		MCHUGH		
Inventor's Signature			Date	
Residence: City	Saugus	State	MA	Country US
				Citizenship US
Mailing Address 5 Hillcrest Street				
Mailing Address				
City	Saugus	State	MA	Zip 01906
				Country US
Name of Additional Inventor, If any		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Julie		MORGAN		
Inventor's Signature			Date	
Residence: City	Moraga	State	CA	Country US
				Citizenship US
Mailing Address 1206 Rimer Drive				
Mailing Address				
City	Moraga	State	CA	Zip 94556
				Country US

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Given Name (first and middle [if any])		Family Name ARMENTANO or Surname			
Inventor's Signature		Date			
GLASTONBURY Residence: City	CT State	US Country	US Citizenship		
68 Fairway Crossing					
Mailing Address					
Glastonbury City	CT State	06033 Zip	US Country		
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name CRONIN or Surname			
Inventor's Signature		Date			
Lakeville Residence: City	MA State	US Country	US Citizenship		
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Given Name (first and middle [if any])		Family Name or Surname		
Annmarie	TEPPER			Date <i>3/18/04</i>
Inventor's Signature <i>Annmarie Tepper</i>				
Residence: City Avon	State CT	Country U.S.	Citizenship	U.S.
Mailing Address 16 Steeplechase				
Mailing Address				
City Avon	State CT	ZIP 06001	Country	U.S.
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Robert J.	MCHUGH			Date
Inventor's Signature				
Residence: City Saugus	State MA	Country US	Citizenship	US
Mailing Address 5 Hillcrest Street				
Mailing Address				
City Saugus	State MA	Zip 01906	Country	US
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Julie	MORGAN			Date
Inventor's Signature				
Residence: City Moraga	State CA	Country US	Citizenship	US
Mailing Address 1206 Rimer Drive				
Mailing Address				
City Moraga	State CA	Zip 94556	Country	US

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Given Name Vincent (first and middle [if any])		Family Name ARMENTANO or Surname	
Inventor's Signature		Date	
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68 Fairway Crossing			
Mailing Address			
Glastonbury City	CT State	06033 Zip	US Country
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Susan (first and middle [if any])		Family Name CRONIN or Surname	
Inventor's Signature		Date	
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Annmarie		TEPPER			
Inventor's Signature					
Residence: City	Avon	State	CT	Country	U.S.
Mailing Address	16 Steeplechase				
Mailing Address					
City	Avon	State	CT	ZIP	06001
Country		U.S.			
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Robert J.		MCHUGH			
Inventor's Signature					
Residence: City	Saugus	State	MA	Country	US
Mailing Address	5 Hillcrest Street				
Mailing Address					
City	Saugus	State	MA	Zip	01906
Country		U.S.			
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Julie		MORGAN			
Inventor's Signature					
Residence: City	Moraga	State	CA	Country	US
Mailing Address	1206 Rimer Drive				
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Country		U.S.			

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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